

"I had an interview with the Board of Guardians of St. James's parish, on the evening of Thursday, 7th September, and represented the above circumstances to them. In consequence of what I said, the handle of the pump was removed on the following day."

John Snow, 1855

## December 2007 Topics

- Influenza Update
- Increase of Shigellosis in Sioux County
- Change in Health Department-Assisted Partner Notification for Chlamydial Infections
- Laboratory Personnel Exposure to *Brucella abortis*



## **Influenza Update**

As of Dec. 31, 2007, a total of 29 laboratory-identified influenza cases had been reported to the North Dakota Department of Health (NDDoH). The counties with reported influenza activity include Barnes, Burleigh, Cass, Dickey, Morton, Nelson, Richland, Sioux, Stark, Stutsman and Ward Counties.

Of the 29 reported cases, 93 percent were identified as type A (n=27), 3.5 percent as type B (n=1) and 3.5 percent as an unknown type (n=1). There have been no influenza-associated pediatric deaths reported to the NDDoH so far this season. Pediatric influenza-associated mortality was made a mandatory reportable condition to the Centers for Disease Control and Prevention (CDC) in 2004. For more information about influenza-associated pediatric mortality, visit <a href="www.ndflu.com//Reporting/PedInfluenzaMortality.aspx">www.ndflu.com//Reporting/PedInfluenzaMortality.aspx</a>.

Influenza viral isolation is an important part of influenza surveillance. It helps identify what strains are circulating in communities, can identify novel influenza viruses and aids in vaccine strain selection. The NDDoH is encouraging influenza specimen submission when a patient tests positive via a rapid test; call the NDDoH at 800.472.2180 for consultation. Free testing will be provided until influenza is characterized in your community.

For more information about influenza or to order educational materials free of charge, visit the NDDoH Influenza website at www.ndflu.com.



## **Increase of Shigellosis in Sioux County**

Since Oct. 1, 2007, 13 cases of shigellosis caused by *Shigella sonnei* have been identified in North Dakota. Seventy-seven percent of the cases reside in Sioux County. North Dakota counties in which cases have been identified since October include Burleigh (1), Sioux (10) and Williams (2). Nine cases (69 percent) are children younger than 10 (age range: 2 to 75; median: 8). Investigations of reported cases are continuing.

Several cases attend elementary school together. No precise risk factor at the school has been identified at this time. One child-care center in Sioux County has been involved at this time. Custer District Health provided educational materials to schools and child-care centers.

Information about shigellosis and shigellosis in child-care setting can be found on the Disease Control website at <a href="https://www.ndhealth.gov/Disease/faq/Faqs.aspx#S">www.ndhealth.gov/Disease/faq/Faqs.aspx#S</a>.



Change in Health Department-Assisted Partner Notification for Chlamydial Infections
As a result of resource limitations in the state STD Program, effective Jan. 1, 2008, the
NDDoH will no longer conduct patient interviews nor partner notification in cases of
uncomplicated\* chlamydial infections. As a result, health-care providers should do one of
the following:

- Conduct partner notification
- Counsel the patient to refer his/her recent partners (within the last three months) for clinical evaluation

Additionally, with all cases of chlamydia, educational materials should be made available to the patient, and the patient should be instructed to abstain from sexual intercourse for seven days after single-dose therapy or until completion of a seven-day regimen and until all recent partners have been treated. Providers should also advise all females with chlamydial infection to be retested approximately three months after treatment.

Please note that current investigation and partner notification practices will remain unchanged for complicated chlamydia cases and all cases of gonorrhea and syphilis.

\*Uncomplicated chlamydial infections are defined as infections occurring in people who (1) are older than 14 years, (2) are not pregnant, <u>and</u> (3) have no complications such as pelvic inflammatory disease, ectopic pregnancy, etc.



## Laboratory Personnel Exposure to Brucella abortis

On Nov. 27, 2007, CDC was notified by another state health department of potential *Brucella abortus* RB51 (RB51) exposures to laboratorians from an isolate used in a recent nationwide laboratory exercise to "rule-out" potential bioterrorism agents. The reported exposures occurred when an RB51 specimen was mislabeled as a routine patient specimen during the exercise. A nationwide investigation was initiated to identify individuals who performed highrisk procedures with the isolate. North Dakota Laboratory Response Network Level A laboratories received the specimen as part of the proficiency exercise. The North Dakota Division of Laboratory Services, along with the Division of Disease Control, followed up with the laboratories to provide guidance for determining laboratorian exposure. To date, no illnesses consistent with brucellosis in any laboratory staff member potentially exposed to an RB51 isolate have been reported.

RB51 is an attenuated vaccine strain of *B. abortus* used to vaccinate cattle against brucellosis. Human illness has been known to have resulted from exposure to RB51 vaccine. Brucellosis in humans causes symptoms that are similar to the flu and may include fever, sweats, headaches, back pains and physical weakness. Severe infections of the central nervous system or lining of the heart may occur. Brucellosis also can cause long-lasting or chronic symptoms that include recurrent fevers, joint pain and fatigue.

For information regarding risk assessments and post-exposure prophylaxis recommendations for potentially exposed individuals, laboratories can contact state or local health officials.

Contributing authors of The Pump Handle include Michelle Feist, Kim Weis, Julie Goplin, Tracy Miller and Kirby Kruger. For questions, suggestions or inquiries, or to be removed from the mailing list, please contact Julie Goplin of the Division of Disease Control at 701.328.2375 or by email at jgoplin@nd.gov.

The pump handle picture in the title was obtained from the website www.ph.ucla.edu/epi/snow.html.



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